

ATTORNEY'S DOCKET NUMBER PHNL020293 US

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

As a below named inventor, I h	nereby declare that:				
My residence, post office address and citizenship are as stated next to my name.					
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: "Touch sensitive display device" the specification of which (check only one item below):					
is attached hereto.	·				
☐ was filed as United States a	application				
Serial No					
on					
and was amended					
on					
☑ was filed as PCT internation	nal application				
On —					
and was amended under PCT	Article 19				
on (if applicable).					
			Company of the public of the		
claims, as amended by any am		ents of the above-identified specificati	on, including the		
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with					
Title 37, Code of Federal Regu					
		States Code, § 119 of any foreign ap on(s) designating at least one country			
States of America listed below	and have identified below any	y foreign application(s) for patent or in	ventor's certificate or		
		e country other than the United States of the application(s) of which priority is			
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIOR	RITY CLAIMS UNDER 35 U.S.C. 119:			
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER		
Europe	02076461.9	15 April 2002	35 USC 119 YES		
Larope	02010401.3	10 April 2002			





13 OCT 2004

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)

Attorneys Docket Number PHNL020293 US

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245 Direct Telephone Calls to: (name and telephone number) (914)332-0222

1-00	FULL NAME OF INVENTOR	JOHNSON	FIRST GIVEN NAME Mark	SECOND GIVEN NAME Thomas
201	RESIDENCE & CITIZENSHIP	<u>Eindhoven</u>	The Netherlands NLX	Great Britain
	POST OFFICE ADDRESS	Post office address Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME MARSH	FIRST GIVEN NAME Simon	SECOND GIVEN NAME Robert
3-CO 203	RESIDENCE & CITIZENSHIP	CITY Eindhoven	The Netherlands	Great Britain
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME DESTURA	FIRST GIVEN NAME Galileo	SECOND GIVEN NAME June Adeva
	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands NLX	COUNTRY OF CITIZENSHIP Philippines
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
4-00	FULL NAME OF INVENTOR	FAMILY NAME _AARTS	FIRST GIVEN NAME Ronaldus	SECOND GIVEN NAME Maria
204	RESIDENCE & CITIZENSHIP	CITY Eindhoven	The Netherlands NLX	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	Post office address Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME HUITEMA	FIRST GIVEN NAME Hjalmar	SECOND GIVEN NAME Edzer Ayco
205	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
M. T. T		1900
DATE 07 November 2003	DATE	O7 November 2003
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	
O7 November 2003	DATE	

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office



ATTORNEY'S DOCKET NUMBER

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(includes Reference to PCT International Applications)

PHNL020293 US

As a below named inventor, I h	As a below named inventor, I hereby declare that:					
My residence, post office address and citizenship are as stated next to my name.						
	of the subject matter which is o	name is listed below) or an original, fir claimed and for which a patent is sou				
is attached hereto.						
☐ was filed as United States a	pplication					
Serial No ————						
on -						
and was amended						
on						
was filed as PCT internation	nal application					
Number PCT/IB03/0105	9					
on <u>20 March 2003</u>						
and was amended under PCT	Article 19					
on	on (if applicable).					
I hereby state that I have review claims, as amended by any am		nts of the above-identified specification	on, including the			
I acknowledge the duty to discl Title 37, Code of Federal Regu		rial to the examination of this applicat	ion in accordance with			
or inventor's certificate or of an States of America listed below any PCT international application	y PCT international application and have identified below any on(s) designating at least one	States Code, § 119 of any foreign app n(s) designating at least one country of foreign application(s) for patent or inv country other than the United States the application(s) of which priority is	other than the United ventor's certificate or of America filed by me			
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 119:				
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119			
Europe	02076461.9	15 April 2002	YES			
		<u> </u>				



Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)

Attorneys Docket Number PHNL020293 US

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245 Direct Telephone Calls to: (name and telephone number) (914)332-0222

	FULL NAME OF INVENTOR	FAMILY NAME JOHNSON	FIRST GIVEN NAME Mark	SECOND GIVEN NAME Thomas
201 RESIDENCE & CITIZENSHIP		CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP Great Britain
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
2-00	FULL NAME OF INVENTOR	FAMILY NAME MARSH	FIRST GIVEN NAME Simon	SECOND GIVEN NAME Robert
202	RESIDENCE & CITIZENSHIP	CITY Eindhoven	The Netherlands NLX	COUNTRY OF CITIZENSHIP Great Britain
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME DESTURA	FIRST GIVEN NAME Galileo	SECOND GIVEN NAME June Adeva
203	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP Philippines
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME AARTS	FIRST GIVEN NAME Ronaldus	SECOND GIVEN NAME Maria
204	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
_	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME HUITEMA	FIRST GIVEN NAME Hjalmar	SECOND GIVEN NAME Edzer Ayco
205	RESIDENCE & CITIZENSHIP	CITY Eindhoven	STATE OR FOREIGN COUNTRY The Netherlands	COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDRESS Prof. Holstlaan 6	5656 AA Eindhoven	STATE & ZIP CODE/COUNTRY The Netherlands

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
	S.R. Marsh	
DATE	DATE 12 November 2003	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	
DATE	DATE	

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office



13 OCT 2004

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHNL020293 US

As a below named inventor, I he	ereby declare that:				
My residence, post office address and citizenship are as stated next to my name.					
I believe I am the original, first a plural names are listed below) of entitled: "Touch sensitive the specification of which (chec	of the subject matter which is on the control of the subject matter which is on the control of the subject to the control of t	name is listed below) or an original, claimed and for which a patent is so	first and joint inventor (if ought on the invention		
is attached hereto.					
was filed as United States a	pplication				
Serial No					
on ————————————————————————————————————					
and was amended					
on					
Was filed as PCT internation Number PCT/IB03/0105 on 20 March 2003	9				
and was amended under PCT A	Article 19		(if applicable).		
claims, as amended by any am	endment referred to above.	nts of the above-identified specification			
I hereby claim foreign priority be or inventor's certificate or of an States of America listed below any PCT international application.	enefits under Title 35, United 5 y PCT international application and have identified below any on(s) designating at least one	States Code, § 119 of any foreign and the states code, § 119 of any foreign and foreign application(s) for patent or country other than the United State the application(s) of which priority	application(s) for patent ry other than the United inventor's certificate or es of America filed by me		
PRIOR FOREIGN/PCT APPLIC	CATION(S) AND ANY PRIORI	TY CLAIMS UNDER 35 U.S.C. 11	9:		
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119		
Europe	02076461.9	15 April 2002	YES		
		DEDARTMENT OF COMMERCE -Pat			

				Rec'	dect/PIC) 13 OCT 2004
Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number PHNL020293 US						
POWI all bus	ER OF ATTORNE iness in the Patent	Y: As a named inventor and Trademark Office co	r, I hereby appoint innected therewith	t the following attorney(s) and/o h. (List name and registration no	or agent(s) to prose umber)	cute this application and transact
Micha	E. Haken, Reg. ael E. Marion, R ard M. Blocker, F				Direct Telephone (name and teleph (914)332-022	none number)
	FULL NAME OF INVENTOR	JOHNSON		FIRST GIVEN NAME Mark	7	SECOND GIVEN NAME Thomas
201	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN COUNTIES THE Netherlands		COUNTRY OF CITIZENSHIP Great Britain
	POST OFFICE ADDRESS	POST OFFICE ADDR Prof. Holstlaa		5656 AA Eindhove		TATE & ZIP CODE/COUNTRY The Netherlands
- 	FULL NAME OF INVENTOR	FAMILY NAME MARSH		FIRST GIVEN NAME Simon	F	SECOND GIVEN NAME Robert
202	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN COUNTY The Netherlands		COUNTRY OF CITIZENSHIP Great Britain
	POST OFFICE ADDRESS	POST OFFICE ADDR Prof. Holstlaa		5656 AA Eindhoven		The Netherlands
	FULL NAME OF INVENTOR	DESTURA		FIRST GIVEN NAME Galileo		SECOND GIVEN NAME June Adeva
203	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN COUNTRY The Netherlands CITY 5656 AA Eindhoven		COUNTRY OF CITIZENSHIP Philippines
	POST OFFICE ADDRESS	POST OFFICE ADDR Prof. Holstlaa				The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME AARTS		FIRST GIVEN NAME Ronaldus STATE OR FOREIGN COUN	ı	SECOND GIVEN NAME Maria COUNTRY OF CITIZENSHIP
204	RESIDENCE & CITIZENSHIP	CITY Eindhoven		The Netherlands	-	The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDR Prof. Holstlaa		5656 AA Eindhove		The Netherlands
-OC	FULL NAME OF INVENTOR	FAMILY NAME HUITEMA		FIRST GIVEN NAME Hjalmar	J	SECOND GIVEN NAME Edzer Ayco
205	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN COUNTRY The Netherlands NLX		COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE ADDRESS	POST OFFICE ADDR Prof. Holstlaa		5656 AA Eindhove		STATE & ZIP CODE/COUNTRY The Netherlands
true: a	nd further that these	e statements were made der section 1001 if Title	with the knowled	ge that willful false statements a	and the like so ma	mation and belief are believed to be de are punishable by fine or may jeopardize the validity of the
SIGNATURE OF INVENTOR 201 SIGNAT			SIGNATURE O	F INVENTOR 202	SIGNATUR	RE OF INVENTOR 203

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

DATE

17 November 2003

DATE

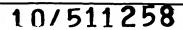
DATE

SIGNATURE OF INVENTOR 205

DATE

DATE

SIGNATURE OF INVENTOR 204



DT05 Rec'd PCT/PT0 1 3 OCT 2004

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Koninklijke Philips Electronics N.C.						
Application No./Patent No.:	Concurrently	Filed/Issue Date:	Concurrently			
Entitled: Touch sensitive display device						
<u>Koninklijke Philips Electroni</u> states that it is:	cs N.V., a corporation	<u>)n</u>				
an assignee of less the three extent (by percent)	 the assignee of the entire right, title and interest; or an assignee of less than the entire right, title and interest. The extent (by percentage) of its ownership interest is% n the patent application/patent identified above by virtue of either: 					
A. An assignment from above. The assignment office at Reel, OR	ent was recorded in t	the United States Pa	atent and Trademark			
B. A chain of title from above, to the current a			on/patent identified			
	s recorded in the Un	ited States Patent a nich a copy thereof is	nd Trademark Office s attached.			
	s recorded in the Un	ited States Patent a nich a copy thereof is	nd Trademark Office s attached.			
	s recorded in the Un	íted States Patent a lich a copy thereof is	nd Trademark Office attached.			
Additional docume	nts in the chain of tit	le are listed on a su	oplemental sheet.			
Copies of assignments or [Note: A separate copy (i.e original document) must b 37 CFR Part 3, if the assig See MPEP 302.08]	e., the original assig	nment document or gnment Division in a	a true copy of the ccordance with			
The undersigned (whose title assignee.	is supplied below) is	authorized to act or	n behalf of the			
4	1.0	in E				
16/12/2004 Date	Kevir	Simons, Reg. No. 4	45,110			
		Patent Attorney (408) 474-9075				

PTO/SB/80 (12-03)

Approved for use through 11/30/2005, OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Papenwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I here	by appoint:			
X	Practitioners associated with the Customer Number:	_ (2	4738	
	Practitioner(s) named below (if more than ten patent practiti	oners are to be nam	ed, then a custo	omer number must be usedi:
I	Name			tion Number
1 F				
l t				
				
-			·	
l -				
1 F				
· [
 -			'	
_ <u>_</u>				
as attorned and a	ey(s) or agent(s) to represent the undersigned before the U all patent applications assigned <u>only</u> to the undersioned acc	nited States Patent	and Traidemark	Office (USPTO) in connection with
attached	all patent applications assigned only to the undersigned acc to this form in accordance with 37 CFR 3.73(b).	xoroing to the USPT(D assignment r	ecords or assignment documents
Assigne	e Name and Address:			
7/	201711			
Gn	ninklijke Philips Electronics N.V Denewoudseweg 1	'-		
56	21 BA Eindhoven, The Netherlands			
A copy	of this form, together with a statement	AT 0		
required	of this form, together with a statement under I to be filed in each application in which this completed by one of the practitioners appoin	'37 CFR 3.73(b) form is used. '	(Form PTC	0/SB/96 or equivalent) is
may be authoriz	completed by one of the practitioners appointed to act on behalf of the assigned and	nted in this form	if the appo	ointed practitioner is
Attorne	ed to act on behalf of the assignee, and musy lsto be filed.	it identify the a	pplication le	n which this Power of
	SIGNATURE of A	ssignee of Record		
diam a	The individual whose signature and title is supplied	d below is authorized	d to act on beh	alf of the assignee
Vame	Matthieu van Kapp			
ignature	· Mayin	·	Date	1/12 //-
itle	Authorized Representative		Telephone	1914) 222 0000
his collectio	n of information is required by 37 159 1.31 and 1.33. The informat	ion is required to alvain	or milain a haced	(744) 333-9600
icluding gat	n of information is required by 37 GPG 1.31 and 1.33. The information costs) an application. Confidentiality is governed by 35 U.S.C. 12 hearing, preparing, and submitting the completed application form to at of time you require to complete hits form and/or suggestions for its Office, U.S. Department of Commerce, P.O. Box 1450, Alexandre.	2 and 37 CFR 1.14. The USPTO, Time will	his collection is	estimated to take 3 minutes to complete,
nd Tradema	rk Office, U.S. Denartment of Commence, B.O. Barrette	reducing this burden, si	hould be sent to	the Chief Information Officer, U.S. Patent
WUKESS.	SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandr	Wandala 344 80040	O NOT SEND FE	EEO UK COMPLETED FORMS TO THIS

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.